## FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Processing Washington, D.C. 20549

SEC Section

OMB Number Expires:

Estimated average burden hours per response.....16.00

FORM D

JAN 16 2008

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATIO SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix	Serial					
DATE R	ECEIVED					
	Î					

Name of Offering (  check if this is an amendment and name has changed, and indicate change.)  Private Placement of Limited Partnership Interest of Longhorn Offshore Investors, L.P.	PROCESSED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	HOOLOGER
Type of Filing:  New Filing  Amendment	JAN 2 8 2008
A. BASIC IDENTIFICATION DATA	-THOMSON _
I. Enter the information requested about the issuer	FINANCIAL
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Longhorn Offshore Investors, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone No	umber (Including Area Code)
1445 Ross Avenue, Suite 4450, Dallas, TX 75202 (214) 452-626	0
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone N (if different from Executive Offices)	lumber (Including Area Code)
Brief Description of Business	
Investment Partnership	
	ittill tilli itill tilli tilli hill tilli kall tilli tilli tilli
Type of Business Organization  corporation business trust limited partnership, already formed limited partnership, to be formed	08022246
Month Year  Actual or Estimated Date of Incorporation or Organization: 014 016 Actual Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)	

#### GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDI	ENTIFICATION DATA		
2. Enter the information re	quested for the fol	lowing:			
• Each promoter of t	he issuer, if the iss	suer has been organized w	ithin the past five years;		
Each beneficial own	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
Each executive offi	icer and director o	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
Each general and n	nanaging partner o	f partnership issuers.			
<u></u>					<b>57</b> 0 1 1/
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or      Managing Partner
Full Name (Last name first, it	f individual)				
Longhorn Offshore Mana	gement, Inc.				
Business or Residence Address 1445 Ross Avenue, Suite		• • • • • • • • • • • • • • • • • • • •	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)	<del></del>		·-	
Kristynik, Kristopher N	Director of Gene	eral Partner			
Business or Residence Addres	ss (Number and	Street, City, State, Zip Co	ode)		
1445 Ross Avenue, Suite	4450, Dallas, T	X 75202			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Eckian, Philip M Directo		artner			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
1445 Ross Avenue, Suite	4450, Dallas, T.	X 75202			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Address	ss (Number and	Street, City, State, Zip Co	ode)	<del></del>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	findividual)				
Business or Residence Address	ss (Number and	Street, City, State, Zip Co	ode)	<del>.</del>	-
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Business or Residence Address	ss (Number and	Street, City, State, Zip Co	ode)	<u> </u>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (Number and	Street, City, State, Zip Co	ode)	, <u>-</u>	
	(Use blar	nk sheet, or copy and use	additional copies of this sl	heet, as necessary)	

					В. І	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sole	d, or does t	he issuer i	ntend to se	ll, to non-a	ccredited i	nvestors in	this offer	ing?		Yes	No =
						n Appendix				-			_
2.	What is	the minim	ium investn	nent that w	vill be acce	pted from a	any individ	lual?				<u>\$_50</u>	00.000
3.	Does th	e offering	permit join	t ownershi	ip of a sing	gle unit?						Yes	No
											irectly, any		
	If a pers or states	on to be lis s, list the na	sted is an as:	sociated pe Foker or de	erson or age ealer. If me	ent of a brok ore than five	cer or deale e (5) persoi	r registered is to be list	I with the S ed are asso	SEC and/or	he offering. with a state sons of such		
Full	Name (I	Last name	first, if ind	ividual)			<del></del>			-			
Busi	ness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Lip Code)						
Nam	e of Ass	sociated B	roker or De	aler	<del></del>						<u> </u>		
State	es in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers	<u> </u>					
			s" or check									□ A1	I States
	ÁL	AK	AZ	AR	CA	[CO]	CT	DE	D <u>C</u>	FL	GA	HL	[ID]
	IL.	IN	[AZ]	KS	KŸ	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI.	WY	PR
Full	Name (I	Last name	first, if ind	ividual)		<del></del>							- <del></del>
Busi	ness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)				<del></del>		
Nam	e of Ass	ociated Bi	oker or De	aler				<del></del>			<u>-</u>	<u>.</u> .	
State	s in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers	<u> </u>		· · · · ·	<del>-</del>		
	(Check	"All States	s" or check	individual	States)						***************************************	□ VI	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
	II.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WL	OR WY	PA PR
			first, if indi			[9]					(3.1)		
									- 11				
Busi	ness or	Residence	Address (1	Number an	d Street, C	Sity, State, 2	Zip Code)						
Nam	e of Ass	ociated Bi	oker or De	aler							_		
State	s in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit l	Purchasers			· <del></del>			
	(Check	"All States	s" or check	individual	States)	•••••	•••••				***************************************	☐ Al	l States
	AL	AK	AZ	AR	ĆA	CO	CT	DE	DC	FL	GA	Н	[ID]
	11,	IN	[]A	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	TX	NM UT	NY) VT	NC VA	ND WA	OH) WV	OK WI	OR WY	PA PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, chec this box and indicate in the columns below the amounts of the securities offered for exchange an	k	
	already exchanged.  Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0.00	\$ 0.00
	Equity		\$ 0.00
	Common Preferred	. 3	<b></b>
	Convertible Securities (including warrants)	c 0.00	0.00
	Partnership Interests	e 21 044 739 57	·
			\$ 0.00
	Other (Specify)	21.044.739.57	<b>—</b>
	Answer also in Appendix, Column 3, if filing under ULOE.	. \$	3 - 1,0 1 1,1 0 0 10 1
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	e	Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$ 21,044,739.5
	Non-accredited Investors	. <u>0</u>	\$ 0.00
	Total (for filings under Rule 504 only)	. 0	\$ 0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security 0	Sold § 0.00
	Rule 505		\$ 0.00
			\$ 0.00
	Rule 504		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insured. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	e ·.	3
	Transfer Agent's Fees		\$ 0.00
	Printing and Engraving Costs	_	§ 0.00
	Legal Fees	_	\$ 0.00
	Accounting Fees	_	\$ 0.00
	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)	<del></del>	§ 0.00
	Other Expenses (identify)	_	\$ 0.00
	Total		\$ 0.00
	- V-W4 (40))))))		

L	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$21,044,739.57
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[	\$	. 🗆 \$
	Purchase of real estate	[	] \$	
	Purchase, rental or leasing and installation of mac and equipment		]\$	
	Construction or leasing of plant buildings and fac	ilities	] <b>\$</b>	
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	<b>¬ \$</b>	
	Repayment of indebtedness	-	<del></del> '	
	Working capital	_	_	<del>_</del>
				. 🗆 \$
	Column Totals	[	\$ 0.00	\$_21,044,739.5
	Total Payments Listed (column totals added)		☐ \$ <u>2</u> 1	1,044,739.57
		D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commiss	sion, upon writte	
Iss	uer (Print or Type)	Signature	Pate	<del></del>
Lo	nghorn Offshore Investors, L.P.		January 11, 200	8
	ne of Signer (Print or Type)	Title of Signer (Print or Type)	·	
Kris	topher N. Kristynik	Director of Longhorn offshore Management In	c., General Part	tner

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE								
	any party described in 17 CFR 230.262 presently subject to any of the disqualification rovisions of such rule?	Yes	No					

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
Longhorn Offshore Investors, L.P.	January 11, 2008
Name (Print or Type)	Title (Print or Type)
Kristopher N. Kristynik	Director of Longhorn Offshore Management Inc., General Partner

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX										
1	Intend to non-a investors	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL	<u> </u>										
AK								!			
ΛZ											
AR											
CA								,			
СО	;										
СТ											
DE							<u> </u>	L			
DC											
FL							<u></u>				
GA											
HI											
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IA											
KS											
KY									[		
LA											
ME	-	l									
MD				_							
MA											
MI											
MN											
MS											

# **APPENDIX** 1 2 3 4 Disqualification Type of security under State ULOE and aggregate (if yes, attach Intend to sell explanation of to non-accredited offering price Type of investor and investors in State offered in state amount purchased in State waiver granted) (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Accredited Non-Accredited Yes No State Yes No Investors Investors **Amount Amount** MO MT NE NV NH NJ NM NY NC ND ОН OK OR PΑ RI SC SD TN Limited Partnership Interest \$6,044,739.57 \$6,044,739.57 \$0.00 TX 0 UT VT VAWA WVWI

				APP	ENDIX				
1		2	3		4				
	to non-a	to sell accredited is in State a-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and explar amount purchased in State under S  (if yes explar waive		lification ate ULOE , attach ation of granted) -Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

